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CAROL A. HERRMANN
Commissioner

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Read this notice to find out about important changes to your Medicaid drug benefits!

Starting July 1, 2004, Medicaid is changing the way it pays for medicine doctors prescribe for adults.

On July 1, 2004:

- Medicaid will only pay for **four brand-name drugs per month** per recipient.
- There is **no limit on the number of generic or over-the-counter drugs** Medicaid will pay for as long as your doctor prescribes them for you.
- The only exception to this is in the case of certain drugs for HIV/AIDS or mental illness. Medicaid will pay for up to 10 brand name drugs in these special categories.
- **THESE NEW LIMITS DO NOT APPLY TO CHILDREN UNDER AGE 21 OR PATIENTS WHO LIVE IN A NURSING FACILITY.**



The majority of drugs on the market today have one or more generic versions that are the same medicine. Many doctors in Alabama allow their patients to decide between a generic drug and a brand name drug because the medicine in the drug is the same. Adults who get prescriptions for more than four medicines in a month should talk with their doctor about the generic and over-the-counter drugs that are available since there is no limit on these drugs.

While Medicaid is changing the way it pays for your medicine, this does not mean you are losing your Medicaid or cannot get the medicine you need. This means that if you get a prescription for five or more brand-name medicines in one month, you will need to talk with your doctor about switching one (or more) of those medicines to a generic or over-the-counter drug that does the same thing in order for Medicaid to pay for it.

Questions about these changes should be mailed to:

Alabama Medicaid Agency
Pharmacy Services Division
PO Box 5624
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Recipient Notice 04-03

Our Mission - to provide an efficient and effective system of financing health care for our beneficiaries.